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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	L ENTITY C		OTHER THAN SMALL ENTITY	
Ŀ	FOR ,	NUM	NUMBER FILED		BER EXTRA	RATE	FEE		RATE	FEE
	SIC FEE CFR 1.16(a))						\$	OR		s
	TAL CLAIMS CFR 1.16(c))		minus 2	0 =		x \$ =		OR	x s =	1/2
	EPENDENT CLA CFR 1.16(b))	IMS	minus	3 = -		x \$=	 	·	- 	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(d))				-	<u> </u>	OR	X S=		
						+ \$=		OR:	+\$=	
* If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL	L	OR-	TOTAL	L
CLAIMS AS AMENDED - PART II										
3	29-06	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	4	Minus	· 20		x s =		OR	X S =	
	Independent (37 CFR 1.16(b))	2	Minus	3	س	x s =		OR	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+5 =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)		:		·	T
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		. HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL* FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		Minus	•	=	x s =		OR	X \$=	, , , ,
	Independent (37 CFR 1.16(b))	•	Minus		=	X \$. =				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(6))							OR	x s=	·
						+s_ = TOTAL ADO'L FEE		OR (+ S = TOTAL ADD'L FEE	
•	,	(Column 1)		(Column 2)	(Column 3)		·		•	
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TADNAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	••	-	x s=		OR -	x \$ =	
	Independent (37 CFR 1 16(b))	• .	Minus	***	=	x s =		OR .	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))					+ 5 =		1		
							 	OR .	+ s = TOTAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". **If the "Highest Number Reviously Paid For IN THIS SPACE is less than 20, enter "20".										

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. on the amount of time you require to complete this form and/or suggestions for reducing this burden, stoud be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.